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FEC FORM 2

STATEMENT OF CANDIDACY

1.	(a) Name of Candidate (in full) PAUL COLIN CLEMENTS										
	(b) Address (number and street) ☐ Check if address chang 2517 BROADWAY AVE					Candidate's FEC Identification Number H4MI06105					
	(c) City, State, and ZIP Code					3. Is This	Nev	N		Amended	
	KALAMAZOO		M	4900	8	Statemer	nt 🔀 (N)	OR	Ш	(A)	
4.	Party Affiliation	5. Office Soug	ght			rict of Candidat	е				
	DEMOCRATIC PARTY	House			MI	06					
DESIGNATION OF PRINCIPAL CAMPAIGN COMMITTEE											
7.	. I hereby designate the following named political committee as my Principal Campaign Committee for the 2016 (year of election)										
	NOTE: This designation should be filed with the appropriate office listed in the instructions.										
(a) Name of Committee (in full) COMMITTEE TO ELECT PAUL CLEMENTS											
	(b) Address (number and street) 2517 BROADWAY AVE										
	(c) City, State, and ZIP Code										
	KALAMAZOO				MI	49008					
DESIGNATION OF OTHER AUTHORIZED COMMITTEES (Including Joint Fundraising Representatives) 8. I hereby authorize the following named committee, which is NOT my principal campaign committee, to receive and expend funds on behalf of my candidacy.											
NOTE: This designation should be filed with the principal campaign committee.											
(a) Name of Committee (in full)											
(b) Address (number and street)											
(c) City, State, and ZIP Code											
I certify that I have examined this Statement and to the best of my knowledge and belief it is true, correct and complete.											
Signature of Candidate						Date					
Paul Clements					tronically Filed]	08/17/2015					
NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Statement to penalties of 2 U.S.C. §437g.											
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